

# FEE TRANSMITTAL for FY 2007

Complete if Known

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,295

Application Number 10/073463  
Filing Date 02/11/2002  
First Named Inventor Rzhetsky et al.  
Examiner Name DeJong  
Art Unit 1631  
Attorney Docket No. 070050.1942

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit  
Account  
Number  
Deposit  
Account  
Name

02-4377

Baker Botts L.L.P.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### Extra Claim Fees

Total Claims  x  25 =  \$0

Independent Claims  x  105 =  \$0

Multiple Dependent  =  \$0

SUBTOTAL  \$0

Fee Description Large Entity Small Entity

Claims in excess of 20  50  25

Independent claims in excess of 3  210  105

Multiple dependent claim, if not paid  370  185

## FEE CALCULATION (continued)

### ADDITIONAL FEES

☐ Surcharge - late oath or filing fee   
☐ Non-English Specification   
☐ Extension for reply within first month   
☐ Extension for reply within second month   
☒ Extension for reply within third month  \$525  
☐ Extension for reply within fourth month   
☐ Extension for reply within fifth month   
☐ Notice of Appeal   
☐ Filing a brief in support of an appeal   
☐ Petition to revive - unavoidable   
☒ Petition to revive - unintentional  \$770  
☐ Utility Issue Fee   
☐ Design Issue Fee   
☐ Publication Fee   
☐ Petitions to the Commissioner   
☐ Request for Continued Examination (RCE)   
☐ Information Disclosure Statement (IDS)

Other fee -

SUBTOTAL (\$ 1,295

## SUBMITTED BY

(Complete if applicable)

Name (Print/Type) Kimberley A. Gavin

Registration No. 51,723  
(Attorney/Agent)

Telephone 212-408-2500

Signature

Date 06/13/2008

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

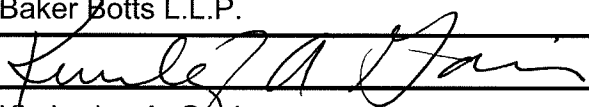
Application Number	10/073463
Filing Date	02/11/2002
First Named Inventor	Rzhetsky et al.
Art Unit	1631
Examiner Name	DeJong
Attorney Docket Number	070050.1942

**ENCLOSURES (Check all that apply)**

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input checked="" type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
|--|---|--|

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Baker Botts L.L.P.		
Signature			
Printed name	Kimberley A. Gavin		
Date	06/13/2008	Reg. No.	51,723

**CERTIFICATE OF TRANSMISSION/MAILING**

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Signature			
Typed or printed name		Date	

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